IHCP bulletin

Note: This bulletin is obsolete. Please see <u>BT201060</u> for the updated version of this bulletin.

INDIANA HEALTH COVERAGE PROGRAMS

BT201053

NOVEMBER 17, 2010



To all providers

New Prior Authorization (PA) for elective hospital inpatient admission

The Office of Medicaid Policy and Planning (OMPP) is promulgating an emergency rule to avoid an anticipated budgetary shortfall and to remain within the available Medicaid appropriation. Effective January 1, 2011, Prior Authorization (PA) will be required for all non-emergent inpatient hospital admissions, including all elective or planned inpatient hospital admissions. Emergency admissions, routine vaginal deliveries, C-section deliveries, and newborn stays will not require PA.

This applies to members of all ages served by traditional Medicaid. It does not apply to members who have both Medicare and Medicaid coverage. The effective date of January 1, 2011, will apply to inpatient stays with an admit date on or after January 1, 2011.

Providers are required to contact ADVANTAGE Health SolutionsSM (1-800-784-3981) at least two days prior to admission. All inpatient hospital PAs will be requested via telephone. The facility must call prior to the admission and provide medical necessity. To assure a 48-hour turnaround, the PA request should be made by a clinical staff person. For non-emergent and urgent care admission that occur outside normal business hours, including weekends and holidays, providers will have 48 hours from the time of admission to request PA.

Additional information will be available in the *Indiana Health Coverage Programs (IHCP) Provider Manual*. The OMPP appreciates your cooperation and your continued participation as providers in the IHCP.

QUESTIONS?

If you have questions about this bulletin, please contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278.

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